

DOCKET NO. CML00320CR

UNITED STATES PATENT AND TRADEMARK OFFICE

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APR 13 2005

APPLICANT(S) Bradley N. Engel et al. GROUP ART UNIT: 2827
APPLN. NO.: 10/647,976 EXAMINER: Trong Q Phan
FILED: August 25, 2003 CONFIRMATION NO.: 2835
TITLE: METHOD OF WRITING TO A MULTI-STATE MAGNETIC RANDOM
ACCESS MEMORY CELL

Certificate of Transmission under 37 C.F.R. 1.8

I hereby certify that this correspondence is
being facsimile transmitted to the Patent
and Trademark Office.

on

4-13-05

Signature

Pat Thomas
Printed Name of Person Signing
Certificate

AMENDMENT UNDER 37 C.F.R. 1.115

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This paper is responsive to the Office Action dated January 25, 2005, having a shortened statutory period of three months expiring April 25, 2005. Further examination and reconsideration are respectfully requested in view of the election made below.

FEES

No fees are believed to be owed in connection with this communication. However, Applicants continue to authorize the payment of any fees or the credit of any refunds in connection with this application from or to this Deposit Account No. 503079 (Freescale Semiconductor, Inc.).

Attny Docket No. CML00320CR

**FAX TRANSMITTAL SHEET**

Freescale Semiconductor, Inc.
 Law Department
 7700 W. Parmer Lane
 MD: TX32/PL02
 Austin, TX 78729
 Telephone: (512) 996-6839
 Facsimile: (512) 996-6854

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18

Number of Pages (including this page)

Date: April 13, 2005
 To: Trong Q. Phan - 2835
 Location: United States Patent and Trademark Office
 Fax No.: 703-872-9306
 From: Pat Thomas for Robert L. King
 Subject: 10/647,976 - Engel et al.
 Filed: August 25, 2003

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MESSAGE:

Enclosed herewith, please find an **INFORMATION DISCLOSURE STATEMENT** for filing in the below-identified application. If Applicant has overlooked any fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit 503079, Freescale Semiconductor, Inc.

ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:

1.	x	1 page Facsimile Cover Sheet
2.	x	3 page Information Disclosure Statement
3.	x	1 page Form PTO/SB/08
4.	x	11 page Amendment
5.	x	1 page Fee Transmittal - in duplicate

Paid by Deposit Account: 503079, Freescale Semiconductor, Inc. \$180

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING FACSIMILE TRANSMITTED
 TO THE PATENT AND TRADEMARK OFFICE:

ON: 4-13-05
 Date

Pat Thomas
 Signature

FEE TRANSMITTAL Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
		Application Number	10/647,976
		Filing Date	August 25, 2003
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		Examiner Name	Trong Q. Phan
		Group Art Unit	2835
TOTAL AMOUNT OF PAYMENT		(\$)	180
		Attorney Docket No.	CML00320cr

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 503079 Deposit Account Name FREESCALE SEMICONDUCTOR, INC. The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.	FEE CALCULATION (continued) 3. 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FEE CALCULATION					
1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1011	300	2011	150	Utility filing fee	300
1111	500	2111	250	Utility search fee	500
1311	200	2311	100	Utility Exam fee	200
1002	300	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	780	2004	395	Reissue filing fee	
1005	200	2005	100	Provisional filing fee	
SUBTOTAL (1)					(\$)
2. EXTRA CLAIM FEES					
Total Claims		Previously Paid**	Extra Claims	Fee from below	Fee Paid
		20	X	50	
Independent Claims		9	X	200	
Multiple Dependent					360 =
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple dependent claim, if not paid	
1204	88	2204	44	* Reissue independent claims over original patent	
1205	200	2205	100	* Reissue claim in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)
**or number previously paid, if greater. For Reissues, see above.					

SUBTOTAL (3)				(\$)	180
* Reduced by Basic Filing Fee Paid					
SUBMITTED BY					
Name (Print/Type)		Robert L. King		Registration No.	30,185
Signature		<i>Robert L. King</i>		Telephone	(512) 996-6839
				Date	April 12, 2005

FEE TRANSMITTAL <small>Patent fees are subject to annual revision</small> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<i>Complete if Known</i>	
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1807	130	1807	130	Processing fee under 37 CFR 1.17(k)																																																																																																																																																							
1806	180	1806	180	Submission of IDS																																																																																																																																																							
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																							
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))																																																																																																																																																							
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))																																																																																																																																																							
1801	790	2801	395	Request for Continued Examination (RCE)																																																																																																																																																							
1802	900	1802	900	Request for expedited examination of a design application																																																																																																																																																							
Other fee (specify):																																																																																																																																																											
1. BASIC FILING FEE <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1011</td><td>300</td><td>2011</td><td>150</td><td>Utility filing fee</td><td>300</td></tr><tr><td>1111</td><td>600</td><td>2111</td><td>250</td><td>Utility search fee</td><td>500</td></tr><tr><td>1311</td><td>200</td><td>2311</td><td>100</td><td>Utility Exam fee</td><td>200</td></tr><tr><td>1002</td><td>300</td><td>2002</td><td>175</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>550</td><td>2003</td><td>275</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>790</td><td>2004</td><td>395</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>200</td><td>2005</td><td>100</td><td>Provisional filing fee</td><td></td></tr></tbody></table> <div style="text-align: right;">SUBTOTAL (1) (\$)</div>	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	1011	300	2011	150	Utility filing fee	300	1111	600	2111	250	Utility search fee	500	1311	200	2311	100	Utility Exam fee	200	1002	300	2002	175	Design filing fee		1003	550	2003	275	Plant filing fee		1004	790	2004	395	Reissue filing fee		1005	200	2005	100	Provisional filing fee		2. EXTRA CLAIM FEES <div style="margin-bottom: 10px;">Total Claims: <input type="text"/> - Previously Paid: <input type="text"/> = Extra Claims: <input type="text"/> X Fee from below: <input type="text"/> = Fee Paid: <input type="text"/></div> <div style="margin-bottom: 10px;">Independent Claims: <input type="text"/> - Previously Paid: <input type="text"/> = Extra Claims: <input type="text"/> X Fee from below: <input type="text"/> = Fee Paid: <input type="text"/></div> <div style="margin-bottom: 10px;">Multiple Dependent: <input type="text"/> = Fee Paid: <input type="text"/></div> <div style="margin-bottom: 10px;">Multiple Dependent: <input type="text"/> = Fee Paid: <input type="text"/></div> <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th></tr></thead><tbody><tr><td>1202</td><td>50</td><td>2202</td><td>25</td><td>Claims in excess of 20</td></tr><tr><td>1201</td><td>200</td><td>2201</td><td>100</td><td>Independent claims in excess of 3</td></tr><tr><td>1203</td><td>360</td><td>2203</td><td>180</td><td>Multiple dependent claim, if not paid</td></tr><tr><td>1204</td><td>88</td><td>2204</td><td>44</td><td>* Reissue independent claims over original patent</td></tr><tr><td>1205</td><td>200</td><td>2205</td><td>100</td><td>* Reissue claim s in excess of 20 and over original patent</td></tr></tbody></table> <div style="text-align: right;">SUBTOTAL (2) (\$)</div> <div style="font-size: small;">*or number previously paid, if greater. For Reissues, see above.</div>	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	1202	50	2202	25	Claims in excess of 20	1201	200	2201	100	Independent claims in excess of 3	1203	360	2203	180	Multiple dependent claim, if not paid	1204	88	2204	44	* Reissue independent claims over original patent	1205	200	2205	100	* Reissue claim s in excess of 20 and over original patent																																																																												
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